



CFR 2133  
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PTO/SB/22 (12-04)

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|---|------------|---|------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  |            | Docket Number (Optional)<br><b>678-804 (P10162)</b> |                  |
| Application Number <b>10/072,579</b>  |            | Filed <b>February 6, 2002</b>                       |                  |
| For <b>APPARATUS AND METHOD FOR GENERATING CODES IN A COMMUNICATION...</b>  |            |   |                  |
| Art Unit <b>2133</b>  |            | Examiner <b>TORRES, Joseph D.</b>                   |                  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |            |   |                  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |            |   |                  |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                             |                  |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120      | \$60  | \$ <b>120.00</b> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450      | \$225   | \$ _____         |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1020     | \$510   | \$ _____         |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590     | \$795   | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160     | \$1080  | \$ _____         |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |            | 05/31/2005 FFAMIA2 00000015 10072579                |                  |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.   |            | 01 FC:1251 120.00 DP                                |                  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |   |                  |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |            |   |                  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <b>04-1121</b> . I have enclosed a duplicate copy of this sheet. |            |   |                  |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>   |            |   |                  |
| I am the <input type="checkbox"/> applicant/inventor.   |            |   |                  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |            |   |                  |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <b>33,494</b>  |            |   |                  |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |            |   |                  |
| _____<br>Signature  |            | _____<br>Date                                       |                  |
| <b>Paul J. Farrell</b>  |            | <b>May 25, 2005</b>                                 |                  |
| _____<br>Typed or printed name  |            | <b>(516) 228-8484</b>                               |                  |
|   |            | _____<br>Telephone Number                           |                  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                 |            |   |                  |
| <input type="checkbox"/> Total of _____ forms are submitted.  |            |   |                  |

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: May 25, 2005

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Michael J. Musella